



# STATE OF TENNESSEE 2004 AD VALOREM TAX REPORT





EXACT NAME OF COMPANY FILING	THIS REPORT
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Y, STATE $\&$ ZIP CODE OF COMPANY $`$	'S PRINCIPLE OFFICE <u>IN TENNESSEE</u>
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	FMAIL
	BER, CITY, STATE & ZIP CODE OF CO Y, STATE & ZIP CODE OF COMPANY

MAIL TO:

# COMPTROLLER OF THE TREASURY OFFICE OF STATE ASSESSED PROPERTIES

James K. Polk State Office Building, Suite 1700 505 Deaderick Street Nashville, Tennessee 37243-0281 (615) 401-7900 FAX (615) 532-8666 osap.osap@state.tn.us

Not Operating

#### MOTOR BUS AD VALOREM TAX REPORT GENERAL INSTRUCTIONS

- 1. This report must be filed with the Comptroller of the Treasury on or before April 1, 2004.
- 2. <u>FAILURE</u> to file a complete report will result in a <u>FORCED ASSESSMENT</u>, and the property owner may, at the discretion of the Comptroller, be liable to a penalty of \$100 for each and every day the owner is delinquent in filing. Tennessee Code Annotated § 67-5-1317.
- This report is subject to AUDIT by the office of the Comptroller. Tennessee Code Annotated § 67-5-1320.
- **4.** Blank report forms are available at <a href="http://www.comptroller.state.tn.us/sap/advalorem.htm">http://www.comptroller.state.tn.us/sap/advalorem.htm</a>. The report may be printed, completed manually, and filed; or the report may be completed on-line, printed, and filed.
- 5. Round all dollar figures to whole dollars. Do not leave blanks. Enter "0" for none.
- 6. Guide for preparing Lines 10-13: (As of 12/31/03). These amounts apply only to trucking operations.

				Net Operating
တျ	<b>Total Current Assets</b>	<b>Total Current Liabilities</b>	<b>Gross Revenues</b>	Income
Ш	Cash and Deposits	Notes Payable	Total Revenues from	Gross Revenues
_	Temporary Investments	Accounts Payable	trucking operation.	minus operating
ᆈ	Accounts Receivable	Accrued Interest		expenses not
≥	Notes Receivable	Taxes Payable		including interest
۷I	Materials and Supplies	Accrued Wages, Salaries		expense.
×I	Prepaid Expenses	Customer Deposits		
Ш	Other Current Assets	Other Current Liabilities		

- 7. Revenue Equipment is all equipment used in direct production of income, i.e., Buses or Vans.
- **8. Line 14A**-Cost of Total System Revenue Equipment "OWNED" should be the gross original cost, before depreciation if purchased new. Cost of used equipment should be the acquisition cost.
- Line 14B-Cost of Total System Revenue Equipment "LEASED" should be the gross original cost, new or used, to the lessor. If the actual cost is not available, reasonable estimates will be considered if adequate details are provided.
- 10. Line 14C-Cost of Total System Revenue Equipment "USED" should be the gross original cost, new or used,
- **11. Line 15**-Report the total number of Sysem Power Units owned, used, or Leased by your bus company. This number should match the total for lines 1-10 on MB -4.
- **12. Line 16**-Report the Real Property owned in the exact name of your bus company.
- 13. Line 17-Report the Real Property Under Construction in the exact name of your bus company.
- 14. Line 18-Report the Purchases and Sales of Real Property owned in the exact name of your bus company.
- 15. Line 19-List all Personal Property Owned, Used, or Leased by your bus company.
- **16.** Page MC-4-Summarize all Carrier Operating Property Owned, Used, or Leased by your bus company.
- **17.** Page MC-5- List where your Over-The-Road Equipment is physically located. As an alternative, you may list primary points of pickup and delivery.

"When providing additional information, please use a standard 8 1/2" X 11" page."

## **MOTOR BUS**

### 2004 AD VALOREM TAX REPORT

B. Mailing Address: (If different)  C. Tennessee Primary Physical Location: (If different)  3. Telephone Number: 4. Company Web Site: 5. Direct questions about this report to:  6. Name and Address of President or Owner:  (Name and Tille) (Name and Tille) (Street) (City, State) (Cit	1. Company Legal Name:			
City, State)   City State	Doing Business as:			
Coly, State)   Coly State)	2. A. Business Address:			
B. Mailing Address: (If different)  C. Tennessee Primary Physical Location: (If different)  3. Telephone Number: 4. Company Web Site: 5. Direct questions about this report to:  6. Name and Address of President or Owner:  (Name and Tille) (Name and Tille) (Street) (City, State) (Cit		(Street)		
(If different)  (Chy. State)		(City, State)		(Zip Code)
(If different)  C. Tennessee Primary Physical Location: (If different)  3. Telephone Number:  4. Company Web Site: 5. Direct questions about this report to:  (Name and Title) (Name and Title) (Name and Title) (Street or P. O. Box) (City, State) (City, St	B. Mailing Address:			
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Physical Location: (If different)  3. Telephone Number: 4. Company Web Site: 5. Direct questions about this report to:  (Name and Title) (Street or P. O. Box) (City. State) (Zip Code) (Street or P. O. Box) (City. State) (Zip Code) (Telephone No.) (e-mail)  7. Is your company a common carrier for hire?  8. Motor carrier authority: USDOT#  1. Total miles for all over-the-road vehicles operated during the year ended December 31, 2003: A. Tennessee Only  B. Total System including TN  10. Total Current Assets: \$ 11. Total Current Liabilities: \$  SYSTEM  12. Gross Revenues \$ 13. Net Operating Income \$  14. Total System Revenue Equipment Cost: (Over-the-road vehicles)  15. Total Number of System Power Units:	C. Tennessee Primary	(Stroot)		
(It different) 3. Telephone Number: 4. Company Web Site: 5. Direct questions about this report to:  (Name and Title) (Name and Title) (Street or P. O. Box) (City, State)				(7in Code)
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(City, State) (Zip Code) (	(Name and Title)		(Name and Title)	
(Telephone No.) (Fax No.) (Telephone No.) (Fax No.)  (e-mail)  7. Is your company a common carrier for hire? Yes No  8. Motor carrier authority: USDOT# ICC# or FHWA#  9. Total miles for all over-the-road vehicles operated during the year ended December 31, 2003:  A. Tennessee Only B. Total System including TN  10. Total Current Assets: \$ 11. Total Current Liabilities: \$  SYSTEM  12. Gross Revenues \$ 13. Net Operating Income \$  14. Total System Revenue Equipment Cost: (Over-the-road vehicles) System Power Units:	(Street or P. O. Box)		(Street or P. O. Box)	
(e-mail)  7. Is your company a common carrier for hire? Yes No  8. Motor carrier authority: USDOT# ICC# or FHWA#  9. Total miles for all over-the-road vehicles operated during the year ended December 31, 2003:  A. Tennessee Only B. Total System including TN  10. Total Current Assets: \$ 11. Total Current Liabilities: \$  SYSTEM  12. Gross Revenues \$ 13. Net Operating Income \$  14. Total System Revenue Equipment Cost: (Over-the-road vehicles) System Power Units:	(City, State)	(Zip Code)	(City, State)	(Zip Code)
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8. Motor carrier authority: USDOT# ICC# or FHWA#  9. Total miles for all over-the-road vehicles operated during the year ended December 31, 2003:  A. Tennessee Only B. Total System including TN  10. Total Current Assets: \$ 11. Total Current Liabilities: \$  SYSTEM  12. Gross Revenues \$ 13. Net Operating Income \$  14. Total System Revenue Equipment Cost: System Power Units:	(e-mail)		(e-mail)	
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A. Tennessee Only  B. Total System including TN  10. Total Current Assets:  \$ 11. Total Current Liabilities:  \$ 2	8. Motor carrier authority:	USDOT#	ICC# or F	HWA#
10. Total Current Assets: \$ 11. Total Current Liabilities: \$  SYSTEM  12. Gross Revenues \$ 13. Net Operating Income \$   14. Total System Revenue Equipment Cost: System Power Units:	9. Total miles for all over-the	-road vehicles operated	during the year ended Dece	mber 31, 2003:
12. Gross Revenues   \$   13. Net Operating Income   \$         14. Total System Revenue Equipment Cost: (Over-the-road vehicles)	A. Tennessee Only		B. Total System include	ding TN
12. Gross Revenues   \$   13. Net Operating Income   \$	0. Total Current Assets:	\$	11. Total Current Liab	ilities: <u>\$</u>
14. Total System Revenue Equipment Cost:  (Over-the-road vehicles)  15. Total Number of System Power Units:	<u>SYSTEM</u>			
(Over-the-road vehicles) System Power Units:	I2. Gross Revenues	\$	13. Net Operating Inco	ome <u>\$</u>
	I4. Total System Revenue Eq	uipment Cost:	15. Total Number of	
A Owned ©			System Power Ur	nits:
· · · · · · · · · · · · · · · · · · ·	A. Owned \$			
B. Leased \$ C. Used \$				

## REAL AND PERSONAL PROPERTY LOCATED IN TENNESSEE NOTE: THIS SHEET WILL BE USED FOR YOUR LOCALIZED ASSESSMENT

16. List Real property located in Tennessee owned	in the exact name	e of your bus company.	
Physical Address of the Property	County Name	City (if Inside City Limits)	Original Cost
17. Real Property Under Construction (CWIP). Ente	er the "Expected"	Completion Date.	
Physical Address of the Property Completion Date	County Name	City (if Inside City Limits)	Original Cost
18. Purchases and Sales of Tennessee Real Proper  Physical Address of the Property  Bought/Sold	ty (Mark "B" for E County Name	Bought, "S" for Sold) <u>City (if Inside City Limits)</u>	Sales Price
Thysical Address of the Property	Obuilty Hame	Only (If Inside Only Limits)	<u>Odies i fice</u>
19. List Personal Property Owned, Used, or Leased	by Your Bus Con	npany and Located in Tenness	see.
Physical Address/Description of the Property	<b>County Name</b>	City (if Inside City Limits)	Original Cost
			-

Submit below the new cost (gross original cost before depreciation) for property and equipment purchased or acquired new or the used cost (cost when acquired) for carrier property and equipment used or held for use in carrier operation at the beginning and close of 2003.

Include under Revenue Equipment (Leased) all equipment leased by carrier or otherwise controlled and operated under carrier's Federal Highway Authority, former I.C.C. or State Authority, as of December 31, 2003.

#### \*ESTIMATE IF ACTUAL COST IS NOT AVAILABLE

	ALL STATES TENNESSEE							
Line No.	Type of Property	No. Of Items	Balance at Beginning of Year	Additions During Year	Retirements During Year	No. Of Items	Balance at Close of Year	Balance at Close of Year
	Revenue Equipment (Owned)							
1.	Passenger Bus							
2.	Mini-Passenger Bus							
3.	Van							
1.	Other Revenue Equipment							
	TOTAL							
	Revenue Equipment (Leased or Used)							
5.	*Passenger Bus							
<b>5</b> .	*Mini-Passenger Bus							
7.	*Van							
3.	*Other Revenue Equipment							
	TOTAL							
	Personal Property (Owned, Leased or Used							
€.	Furniture & Fixtures							
).	Computer & Other Office Equipment							
).  .	Tools							
!.	Repair Parts							
	Shop & Garage Equipment							
	Miscellaneous Equipment							
	Non-Revenue Equipment							
	Other:							
٠.	TOTAL							
	TOTAL							
	Real Property (Owned)							
7.	Land & Land Rights							
	Structures							
	Construction in Progress							
	Leasehold Improvements							
	TOTAL							

## OVER-THE-ROAD EQUIPMENT NOTE: THIS SHEET WILL BE USED FOR YOUR DISTRIBUTABLE ASSESSMENT

Please indicate the physical location in Tennessee of all buses or vans when not traveling over the road. As an alternative, you may report major points of pickup and delivery. If the buses or vans are located outside any city limits, enter the name of the county only. If located inside a city limits please indicate both the county and city names. Provide the names of all Tennessee owner/operators providing motor carrier services under your authority in the column provided

Name of County	Name of City	Name of Owner/Operators <u>if applicable</u>

IF ADDITIONAL SPACE IS NEEDED, ATTACH INFORMATION ON A STANDARD 8.5 X 11 INCH SHEET.

### **AFFIDAVIT**

STATE OF	)
COUNTY OF	)
I,	, being the OWNER, PRESIDENT,
SECRETARY, AND /OR PARTNER OF	
do hereby swear and affirm that the fore	going Ad Valorem Tax Report for the year two
thousand four has been prepared from on	ly the original books, papers, and records of said
respondent under my direction in accorda	nce with Tennessee Code Annotated, Section 67-
5-1316, and is true and correct to the best of	of my knowledge and belief.
FURTHER THE AFFIANT SAITH NOT.	
-	NAME
-	OFFICIAL CAPACITY
Sworn to and subscribed before me on this	the, 2004.
-	NOTARY PUBLIC
	My Commission Expires: